

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas As Engrossed: H2/10/25 H2/13/25 H2/20/25 H2/27/25 S3/19/25

95th General Assembly

A Bill

Regular Session, 2025

HOUSE BILL 1288

By: Representative L. Johnson

By: Senator Irvin

For An Act To Be Entitled

AN ACT TO AMEND THE ARKANSAS HEALTH CARE CONSUMER ACT; TO REQUIRE A HEALTHCARE INSURER TO MAKE CERTAIN RETROACTIVE PAYMENTS TO A PROVIDER UPON CREDENTIALING OF A PROVIDER; AND FOR OTHER PURPOSES.

Subtitle

TO AMEND THE ARKANSAS HEALTH CARE CONSUMER ACT; AND TO REQUIRE A HEALTHCARE INSURER TO MAKE CERTAIN RETROACTIVE PAYMENTS TO A PROVIDER UPON CREDENTIALING OF A PROVIDER.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code § 23-99-411(a)(6), concerning the payment responsibility of a healthcare insurer to a participating provider, is amended to read as follows:

(6)(A)(i) ~~For~~ Except as provided in subdivision (a)(6)(B) of this section, for payment purposes, a healthcare insurer shall treat an applicant physician as a participating physician from the date of submission of a substantially completed application once an applicant physician has been approved through an insurer's credentialing process.

(ii) As used in subdivision (a)(6)(A)(i) of this section, "date of submission of a substantially completed application" means the date a healthcare insurer receives an applicant physician's credentialing information, as defined under § 17-95-107, from the Centralized Credentials Verification Service of the Arkansas State Medical



Board.

(B) Subdivision (a)(6)(A) of this section does not apply to the Arkansas Medicaid Program.

/s/L. Johnson